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FEC FORM 3

## REPORT OF RECEIPTS

For An Authorized Committee

ECF	RETARY DE LOC OS PUBLIC REUC OS	
14	APR 15 of the use of 13	

NAME OF COMMITTEE (in full)	TYPE OR PRINT	<b>▼</b>	Example: If typing over the lines.	g, type 🕒	12FE4M5	ì		
Friends of Mary Landr	eu, Inc.				111			
					1 1 1			
ADDRESS (number and street)		#; NW						
▼	Suite 600	Suite 600						
Check if different than previously reported. (ACC)	Washington	1 1 1 1		ا ليا	DC 2	0005		
2. FEC IDENTIFICATION N	UMBER ▼	s	STATE ZIP CODE STATE ▼ DISTRICT					
C C00325126	3. IS THIS NEW (N) OR			AMENDI (A)				
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:  April 15 Quarterly Report (Q1)			PRE-Election Repo		General (12 Special (12	•		
July 15 Quarterly 1  October 15 Quarter		Election	n on		~~~~~~ *******************************	in the State of		
January 31 Year-E	nd Report (YE)		POST-Election Rep	<b>严</b> 意	Runoff (30	R) [ Special (30S)		
Termination Report (TER)		Election			<del>হ</del> ⇔হুফাইজাই। ======!			
5. Covering Period 0	, D D D 7 011	2013	through	09 09	30	2013		
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  Type or Print Name of Treasurer Nancy Marsiglia								
<u></u>	ncy Marsiglia	lary	m-8(			15 2014		
NOTE: Submission of false, error Office Use Only FESAN018	neous, or incomple	ete information	may subject the per	son signing th	is report to tr	FEC FORM 3 (Revised 02/2003)		